

## New Hampshire Board of Nursing

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**OFFICIAL  
ON-LINE  
NEWLETTER  
PUBLICATION  
OF  
THE  
NEW HAMPSHIRE  
BOARD OF NURSING**



First Choice Graduation  
February 24, 2011



First Choice Graduates

**Contact Us:**

21 S. Fruit St., Ste 16

Concord, NH 03301

603-271-2323 (Nursing)

603-271-6282 (LNA)

[www.nh.gov/nursing](http://www.nh.gov/nursing)

The mission of the Board of Nursing is to safeguard life, health, and the public welfare of the people of this state and in order to protect the people of the state of New Hampshire from the unauthorized, unqualified and improper application of services by individuals in the practice of nursing.



Margaret Walker, Ed.D., RN  
Executive Director

**Board Members**

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**FROM THE EXECUTIVE DIRECTOR**

by Margaret J. Walker, Ed.D., RN

Happy Spring!

I hope all licensees are enjoying the warmer weather after our very long and cold winter. With the long winter, the NH Legislature has worked to balance the NH State Budget. All agencies, including the Board of Nursing have been actively involved in the many discussions and hearings during this legislative session. We await the final outcomes by the end of the session on June 30, 2011.

During the Governor's budget reduction phase, the board made the requested reductions which resulted in the loss of the Assistant Director Education position and the two part-time clerk positions in the board office. The Assistant Director Education position (a job-share) filled by Norma Blake and Patricia Orzano will have an impact on the timeliness of educational review response and practice questions. I ask that you email all questions after using our practice decision tree located on our website at [www.state.nh.us/nursing](http://www.state.nh.us/nursing) under the "Nursing Practice" section. Also, please note the procedure for making clinical practice inquiries in this section. The part-time clerk positions leaving board staff are responsible for processing the criminal background histories for license applicants as well as telephone routing and walk-in applications. As a result of this budget reduction, there may be timeliness issues when processing criminal background histories, processing walk-in applications and, communicating with the board staff. We are reviewing our processes to improve efficiency and will do our best to minimize the impact on board services.

Finally, the board is happy to report the First Choice Practical Nurse teachout, second group, is planning to graduate June 9, 2011. The board is thankful to the Manchester Community College for its commitment to the students. The Manchester Community College opened its classroom and resources and made a significant contribution to our completion planning. The board is also thankful to the dedicated educators who assisted the students in their educational endeavor.



You can also contact Board Staff on line by clicking on their email address below.

### **Board Staff**

Margaret J. Walker, Ed.D., RN  
Executive Director  
[mwalker@nursing.state.nh.us](mailto:mwalker@nursing.state.nh.us)

Lori Tetreault, RN-BSN  
Program Specialist IV  
[Lori.Tetreault@nursing.state.nh.us](mailto:Lori.Tetreault@nursing.state.nh.us)

Susan Goodness, CPS  
Administrative Supervisor  
[sgoodness@nursing.state.nh.us](mailto:sgoodness@nursing.state.nh.us)

Kathryn Dickson  
Executive Secretary  
[kdickson@nursing.state.nh.us](mailto:kdickson@nursing.state.nh.us)

Kim Cicchetto  
Program Assistant II  
[kcicchetto@nursing.state.nh.us](mailto:kcicchetto@nursing.state.nh.us)

Susan Isabelle  
Clerk III (Licensure)  
[sisabelle@nursing.state.nh.us](mailto:sisabelle@nursing.state.nh.us)

Debbie Hoos  
Licensure Clerk  
[dhoos@nursing.state.nh.us](mailto:dhoos@nursing.state.nh.us)

Debbie Emerson  
Secretary II  
[demerson@nursing.state.nh.us](mailto:demerson@nursing.state.nh.us)

Kathy Crumb  
Licensure Clerk  
[kcrumb@nursing.state.nh.us](mailto:kcrumb@nursing.state.nh.us)

Joann Seaward  
Licensure Clerk  
[jseaward@nursing.state.nh.us](mailto:jseaward@nursing.state.nh.us)

Debra Sirles  
Accounting Technician  
[Debra.sirles@nursing.state.nh.us](mailto:Debra.sirles@nursing.state.nh.us)

Laurel A. O'Connor, Esq  
Investigator/Prosecutor  
[laurel.o'connor@nh.doj.gov](mailto:laurel.o'connor@nh.doj.gov)

### **FROM THE BOARD CHAIR**

By Robert Duhaime, MBA, RN



I would like to touch upon the subject of disciplinary action guidelines for reporting. Every individual agency, facility, institution, and organization that employs licensed nursing personnel in the State of New Hampshire shall report to the Board of Nursing, within 30 days, any alleged violations of the Nurse Practice Act. If you go to the New Hampshire Board of Nursing website under 326b:37 Disciplinary Action Misconduct, it describes many of the violations of misconduct a licensee may be reported on.

As such, there is a complaint form to be completed and I emphasize that it needs to be filled out completely and as accurately as possible. The area on the complaint form lists witnesses/observers; this needs to be completed with attached supplementary information to the forms, if necessary. The Board of Nursing Prosecuting Attorney needs this information to begin her investigation into the alleged misconduct. It is extremely important that the complaint form is filled out completely and accurately with witness statements attached to the complaint form. Upon receiving the completed report, the Prosecuting Attorney will then move forward with her investigation into the allegations. Until such time that the complaint form is completed accurately, the Prosecuting Attorney's investigation is delayed until all documents are received.

It is our intent to minimize the amount of time that the Board receives a complaint to the time action is taken on the complaint. The Board recommends all who are submitting complaints to read the instructions and complete the complaint form as accurately and completely as soon as possible and attach the witness/observer statements. We appreciate your cooperation in this matter – it allows the Board to move swiftly when we receive complaints of alleged misconduct. The complaint form and instruction to complete the form can be found on the New Hampshire Board of Nursing website ([www.nh.gov/nursing](http://www.nh.gov/nursing)).

In conclusion, the Board will be convening our Annual Retreat in September this year and so far the agenda is full of topics that we will be considering and discussing. Anyone wishing to submit topics for the Board to discuss at our Annual Retreat please do so through the Nursing Board Office, Attention of Dr. Margaret Walker.

### **Applying for Licensure** **Frequently Asked Questions (FAQ)**

**Question:** Is it faster to apply for licensure online? Will I receive my license sooner if I apply online as opposed to applying via the mail?

**Answer:** No, by applying for licensure on line the only time you save is mailing time.

Please note that while applying online any error that is made on the online application is noted and a letter will be sent to the applicant requesting corrected and or missing information before the application can be processed.

**HELPFUL HINTS:**

When calling the Board office, please be ready to provide your name, license number and remember to have a pen and paper ready to write down the information you may be seeking.

**BOARD COMMITTEES****P & E Committee**

Nora Fortin, RN  
(Board representative)

Nancy Fredholm, RN

Renee Maynes, RN

Barbara Pascoe, RN

Connie McAllister, APRN, CRNA

Bonita Kershaw, RN

**Liaison Committee**

Kitty Kidder, APRN,  
(Board representative)

Lisa Sullivan, APRN, CRNA  
Chair

Joyce Blood, APRN

Dorothy Mullaney, APRN

Margaret Franckhauser, RN

Sean Lyons, APRN

Mary Sanford, APRN

**Question:** How will I know if I am licensed, will I receive notification?

**Answer:** No, due to the volume of applicants that we receive we are unable to notify each and every applicant that a license has been issued therefore, you will not receive notification. Paper licenses are no longer mailed and you will not be notified by e-mail.

You may view your license on our website [www.state.nh.us/nursing](http://www.state.nh.us/nursing) by going to the online verification section under the area marked "Quick Links" (please enter the required information only). Once you locate yourself click on your name and this will show your name, license #, issue date and expiration date.

**Question:** How do I complete verification of licensure?

**Answer:** An explanation of the verification process is printed in detail on every application.

Please note that depending upon the application type the verification process can vary.

**License Renewal**  
**Frequently Asked Questions (FAQ)**

**Question:** I just completed my renewal why isn't the new expiration date showing up on the website yet? Why hasn't it "gone through yet"?

**Answer:** The online renewals need to be processed at the N.H. Board of Nursing by the renewal clerk BEFORE they will show up on the "On line verification" portion of the website.

Remember approximately fourteen days before your license expires make sure your updated license appears on our website. If your updated license does not appear this could indicate that an error occurred while you were completing the on line renewal process.

**Question:** What happens if I make a mistake on my online renewal?

**Answer:** If an error has occurred upon your renewal you will be notified by e-mail (therefore, always notify the Board of Nursing in any changes regarding e-mail addresses.)

Please remember to complete your online renewal in a timely fashion so that if an error does occur this will give you enough time to provide us with the corrected information and your license will not expire.

**Question:** What if I want to renew my license on line, but it has already expired?

**Answer:** Once a license has expired it CANNOT be renewed on the website you CANNOT work on an expired license. You must either come to the NH Board of Nursing and complete a reinstatement form or request one to be mailed to you.





Springtime in New Hampshire



### 2011 Joseph D. Vaughan Award Winner

On May 10, 2011 Ann Kelley, RN was recognized as the 2011 recipient of the Joseph D. Vaughan Award for demonstrating outstanding leadership and volunteer service. The award was presented by Governor Lynch during a ceremony held in the Executive Council Chambers.

The Joseph D. Vaughan Award was established in 1962 which was initiated in honor of Joseph D. Vaughan, a legislator who advocated on behalf of seniors and was instrumental in creating a state agency dedicated to the wellbeing of older people.



You are encouraged to complete live scan fingerprinting. Some live scan sites are located on the Board's website at [http://www.nh.gov/nursing/documents/livescan\\_list.doc](http://www.nh.gov/nursing/documents/livescan_list.doc)

If you do not find a convenient live scan site please call the NH State Police Criminal Records.

### **FINGERPRINTING/CRIMINAL BACKGROUND CHECK REMINDERS**

1. When completing the fingerprint/criminal background check within New Hampshire, fingerprint cards are NOT necessary. "Live Scan" fingerprinting does not require cards unless the fingerprinting is completed out of state, in which case the cards MUST be obtained from the Board of Nursing office.
2. The Board of Nursing application fee DOES NOT include the fingerprinting/criminal background check fee. Depending upon which way the fingerprinting/criminal background check is complete and the location will determine the fee. Please refer to the Board of Nursing website [www.nh.gov/nursing](http://www.nh.gov/nursing) under the "FBI Fingerprinting Requirements" in the section marked "Quick Links" for fee schedule.
3. All criminal background checks MUST be notarized.
4. "Live Scan" fingerprinting is encouraged of ALL of our applicants, as the rejection rate is much lower.
5. Please remember that most police departments charge a processing fee which varies depending on the location.

### **Out of State Applicants and Criminal Background Checks/Fingerprints**

Applicants from outside of NH will be sent fingerprint cards and authorization forms. Those applicants are asked to either use law enforcement sites in their respective states or come to NH and use a NH law enforcement site. Please send all fingerprint cards, authorization forms and fees to the Board of Nursing. The board will then send them to the NH State Police for processing.

**Please plan early for this process. We have advised that the results could take as long as 2 months in some cases.**

### **: Complaint Reporting**

**Pursuant to RSA 326-B:37 V:** Every individual, agency, facility, institution, or organization that employs licensed nursing personnel within the state shall report to the board within 30 days any alleged violations of the Nurse Practice Act (RSA 316-B:37, RSA 326-B:41 and Nur 402.04(b)).

**Reportable violation are cited in RSA 326-B:37 II, Nur 402.04 (b) and Nur 402.04 (c).**

**Any alleged violation of the Nurse Practice Act reportable to Bureau of Adult and Elderly Services (BEAS) should also be reported to the Board of Nursing.**

**The complaint form and guidelines can be found on Board of Nursing website [www.nh.gov/nursing](http://www.nh.gov/nursing) under Enforcement.**

### **Social Networking: Something to Think About**

By Lori Tetreault, RN-BSN, Program Specialist IV

Social media sites are playing a prominent role in healthcare. Healthcare settings and healthcare professionals have quickly embraced social networking as a way to interact with patients and share healthcare information.

Nurses and nursing assistants are using social networking to encourage and support their peers, to keep up with healthcare trends, seek answers to clinical questions, enhance skills and judgment, and to seek job opportunities.

Social networking can potentially place a nurse or nursing assistant at risk as actions may present possible ethical and professional boundary violations. As reported, nurses and nursing assistants have faced disciplinary action for demonstrating unprofessional or inappropriate behavior on their social networking site.

Some of the most popular networking sites include: Twitter, YouTube, Facebook, MySpace and LinkedIn.

The "right" to express yourself on a social networking site does not mean freedom from consequences. You are as accountable for what you write just as you are for what you say.

Healthcare professionals should be aware of the potential risks associated with social networking.

### **Things to Consider to Safeguard Interactions:**

- Healthcare professionals should be aware of their organizations policies regarding social networking and what uses are permitted.
- Use secure websites.
- Personal and professional social networking sites should be kept separate to distinguish clear lines between interactions as a healthcare provider and those of friends.
- Personal sites should not provide medical advice, diagnosis, or treatment.
- Take caution when accepting "friend requests" and other invitations to connect with other users or groups.
- Avoid using or accepting personal images and videos.
- Do not disclose any individual identifying information. Be familiar with the Health Insurance Portability and Accountability Act (HIPAA).
- Be aware of and use privacy settings on social networking sites.

**Always Remember: Information posted on a social networking site is permanent and cannot be deleted once shared with others.**

Nursing  
Assistants...  
Caring from the  
Heart!



With our  
appreciation for  
your dedication  
for enriching  
the lives of  
others.

Happy Nursing  
Assistant's  
Week!  
June 16 -23,  
2011

**LNA Corner**

by Lori Tetreault, RN-BSN Program Specialist IV

Hello and Happy Spring!

In celebration of National Nursing Assistants Week, June 16-23 I would like to thank all of the Licensed Nursing Assistants here in NH. I truly appreciate the work you do each day. Your hard work, dedication and commitment enrich the lives of others.

With economic challenges and the changes NH is expected to face, this is a time of high expectations for healthcare providers. We need to keep our attention to the job at hand and the needs of the citizens of NH. It is most important that all LNAs understand the scope of practice and the role you assume providing direct patient care. The LNA Scope of Practice can be found on the Board website [www.nh.gov/nursing](http://www.nh.gov/nursing) under the Nurse Practice Act tab, RSA 326-B:14.

May 24, 2011 the Spring LNA Day of Discussion was held. Registration was only available a few days as full registration was met. Thank you to all of you who support the LNA programs held here at the Board. Education and discussion was focused on professional boundaries, delegation, as well as challenges LNAs are faced with in the workforce. Time was spent navigating the Board of Nursing website to assist LNAs in keeping connected and updated with changes in practice and education.

The Annual LNA/MNA Program Coordinator/Reviewer Meeting and a MNA Day of Discussion will be held in the fall. Watch the website for "Save the Date" notices and registration information later this summer.

I would like to welcome two new approved nursing assistant programs to our family. Dover High School Regional Career Technical Center and Manchester School of Technology.

Online continuing educational programs for LNA/MNA's are available on the Board website. New programs have been added. Please remember programs are not to be sent to the Board office but should be maintained for your records should you be subject to audit for renewal.

Enjoy the summer, engage in your nursing assistance practice and critical issues related to public health and safety and stay active in what is going on around you.

Stay safe.

**Reminder: MNA License Renewal**

A MNA certification expires at the time that the LNA license expires. A MNA certification that becomes inactive due to a non-renewed LNA

license will become null and void after 60 days. Once the MNA certification becomes null and void, a MNA course will be required for certification.

**LNA/MNA Continuing Education Programs offered by the Board.**

Visit the website [www.nh.gov/nursing](http://www.nh.gov/nursing)

LNA Scope of Practice  
Professional Boundaries  
Residents Rights  
Topical Drugs  
Medication Administration Safety  
Oral Health Care for the Elderly  
Alzheimer's Dementia in the Elderly  
Oxygen Therapy  
MNA Scope of Practice  
Social Networking  
Proper Bowel Elimination

**All programs offer 1 contact hour**

**MNA Renewal Requirements:**

A minimum of 50 hours using medication assistant knowledge, judgment and skills within 2 years of date of application and; 4 of the 12 contact hours required for LNA licensure must be related to medication administration **or** successfully completion of a MNA program within 2 years immediately prior to renewal..

**What is the difference between a MNA and a LNA-MC?**

A MNA is a licensed nursing assistant with a NH Board approved certificate able to *administer* medications under the supervision of a licensed nurse to “stable” clients living in facilities and in the community.

A LNA-MC is a licensed nursing assistant with an NH Board approved certificate to *provide assistance, observation and documentation* under the supervision of a licensed nurse to “stable” clients with no complicated medication problems living in assisted living facilities and the community.

**MNA Continuing Competence****What is “Continuing Competency”?**

Continuing Competency is integrated learning by which a licensee gains, maintains or refines practice knowledge, skills, and abilities through a formal education program, continuing education, or clinical practice. This learning is expected to continue throughout the licensees’ career. Remaining active in your learning allows one to remain competent in your field of work.

***Continuing Competence = Continuing Education + Active in Practice  
Requirements Requirements***

**What are the “Continuing Competence” requirements for an MNA?**

LNA requirements include 24 contact hours, (12 per year) or competency testing (state test) completed within 2 years of date of application ... **and** ... 200 active in practice hours in 2 years immediately preceding date of application, or successful completion of a nursing assistant competency test (state test) completed within 2 years of the date of application.

In addition, an MNA must have **4 out of the yearly 12 contact hours** related to **medication administration...** **and...50 additional** active in practice hours in 2 years immediately preceding date of application.



**What is a contact hour?**

One contact hour = 60 minutes of organized learning.

**What is “Active in Practice”?**

Active in practice is defined for an LNA as someone who has worked a minimum of 200 hours within the 2 years immediately preceding the date of expiration of the current license (preceding the date of application) or successful completion of nursing assistant competency test within 2 years of the date of application.

**Who is responsible for keeping track of a LNA/MNA’s contact hours?**

It is the **responsibility** of the licensee (**LNA**) to keep track of their contact hours.

*Contact hour documentation should be easily accessible if you have been chosen for audit by the NH Board of Nursing.*

**What continuing education is acceptable as contact hours?**

Activities/topics eligible for continuing education can be found on the NH Board of Nursing website, [www.nh.gov/nursing](http://www.nh.gov/nursing) under the “Site Map” tab listed under Continuing Competence.

## Governor Lynch Declares May 2, 2011 “Nursing Assistant’s Day” in New Hampshire

On May 2, 2011 at the 12<sup>th</sup> Annual LNA Day Celebration Event held on the State House lawn, Governor Lynch proclaimed Nursing Assistant’s Day in New Hampshire in celebration to honor licensed nursing assistants who serve the citizens of NH across the spectrum of healthcare.

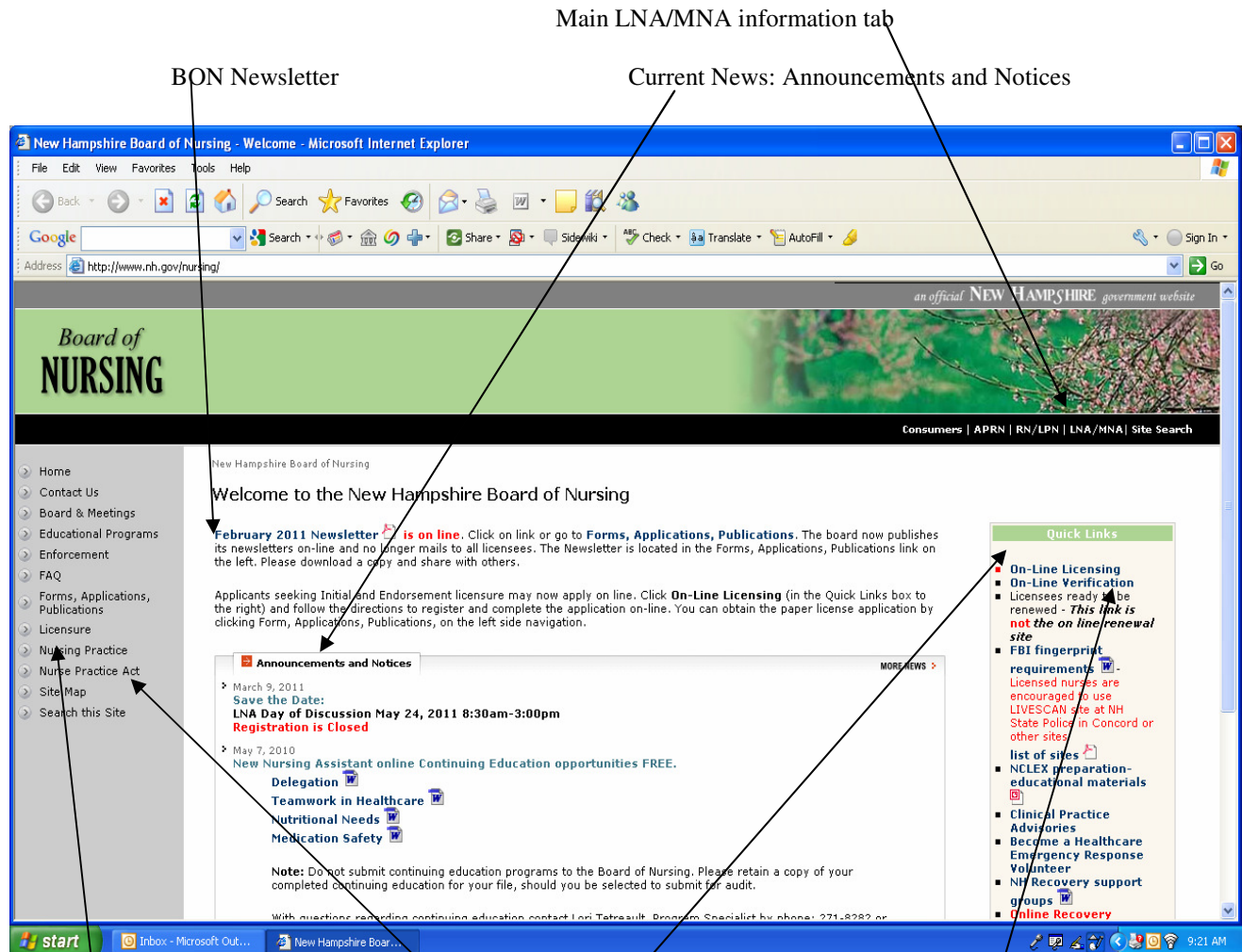
Licensed nursing assistants from around the State were nominated as LNA of the Year.

Nominees were presented certificates of appreciation by Lori Tetreault, RN-BSN, LNA Program Specialist from the NH Board of Nursing.

The Board of Nursing would like to congratulate all of the 2011 nominees:

Theresa Scani	Grace Desrosiers	Patricia Kudalis	Mary Patten
Janelle Bagley	Lisa Doherty	Maya LaChance	Sherry Paulhamus
Ellen Baldoumas	Eva Eldridge	Tiffany LaChance	Stephanie Perez
Kristie Batista	Minerva Fernandez	Laura Lamarche	Melissa Place
Donna Bean	Jayne Fisher	Debra LaRocque	Linda Ridley
Adam Beaudet	Sally Freeman	Renee Lavoie	Barbara Roberts
Terese Billeaud	Arcia French	Saengjan Longley	Renee Root
Sue Bisson	Vickie Gallagher	Karen Loring	Matt Sebert Jana
Linda Blackey	Caitlin Gearty	Wendi Marshall	Shackelford
Gail Bomba	Saadia Gomez	Rossana Martel	Cynthia Ann Smith
Mary Theresa Brady	Nicole Groesser	Margo Martel-Rhodes	Cathy Sulham
Mary Bresler	Deborah Hardy	Danielle McMinn	Charlotte Thompson
Kristal Brotherton	Annie Haughton	Mary Mileti	Donna Thompson
Constance Cody	Janice Henderson	Emily Minns	Bonnie Turcotte
Thomas Connolly	Susan Hibbard	Amanda Morang	Elaine Wallace
Lisa Cote	Casey Jones	Anita Moses	Linda Welch
Heather Day	Candy Kuchman	Lisa Noel	Mary Witham

New Hampshire Board of Nursing  
Website: [www.nh.gov/nursing/](http://www.nh.gov/nursing/)



Continuing Education

On-Line Licensing/Renewal

License verification

NURSE PRACTICE ACT: Rules and Regulation

### NH BOARD OF NURSING NURSING ASSISTANT LICENSURE

#### **RENEWAL OR REINSTATEMENT REQUIREMENTS FOR NURSING ASSISTANTS WHO ARE LISTED ON THE NH NURSE AIDE REGISTRY**

If your license is **currently active**, you can renew if you meet the following requirements:

- 200 hours active in practice as a nursing assistant within two years under APRN, RN or LPN supervision and 12 continuing education hours per year, a total of 24 continuing education hours within two years; **OR**
- A written and clinical competency testing completed within two years.

If your license is **currently inactive**, and you do not meet any of the requirements listed above, you can activate the licensure by successful completion of a written and clinical competency testing. You must e-mail or call the Board office to request a reinstatement application. A list of approved testing facilities will be mailed to you along with your reinstatement application. When you receive your testing results, you can submit your completed reinstatement application along with a copy of your test results and the reinstatement fee to the Board of Nursing.

Please note that when your license is activated, you will not be notified or receive documentation in the mail. You must check the NH Board of Nursing website to verify activation and obtain a print out of your license information.

\*Please see NH BON website <http://www.nh.gov/nursing/> click Licensure tab on left side of home page and

**scroll down to view Licensure - For LNA's.**

<b>Clinical Practice Advisories: October 2010- May 2011</b>	
<b>Board Advisory Date:</b>	
October 21, 2010	<p>Question: Can an APRN, certified as Adult Psychiatric/Mental Health NP, administer botox injections to a separate group of patients in a different clinical setting after successfully completing a training program and obtaining certification to administer botox?</p> <p>Answer: The administration of botox injections would not be within the scope of practice of psychiatric/mental health NP as it is not within the population focus of that national certification. Continuing education does not expand APRN scope of practice.</p>
October 21, 2010	<p>Question: As an APRN (FNP) is it within my scope of practice to administer joint injections in an orthopedic setting after training by my colleagues?</p> <p>Answer: This is within the scope of APRN with appropriate training and demonstrated competency in the procedures and within the appropriate population foci.</p>
November 18, 2010 False labor discharge	<p>Question: Is it within the RN scope of practice to certify false labor and discharge the patient?</p> <p>Answer: The Board reaffirms that the provider will determine competent nurses who can act as the QMP (qualified medical personnel) to certify False labor and discharge of the patient following facility policies and procedures that support the practice.</p>
December 16, 2010 Removal of Double J stents	<p>Question: Is it within RN scope of practice to remove a ureteral double J stent?</p> <p>Answer: The board opined that it is within the RN scope of practice to remove double J ureteral stents after ureteroscopy provided that the RN has the documented education &amp; competencies and that there is a facility policy that supports this activity.</p>
December 16, 2010 Nasal packing & splint removal	<p>Question: If trained by the physician is it within RN scope of practice to:</p> <ul style="list-style-type: none"> <li>➤ Perform packing and splint removal in post operative Septoplasty/Turbinectomy surgical patients</li> <li>➤ Assess condition of tympanic membrane and patency of ventilation tubes in post op myringotomy /tube insertion surgical patients</li> </ul> <p>Answer: The board opined that:</p> <ul style="list-style-type: none"> <li>➤ It is within the RN scope of practice to remove readily visible splints that do not require instrumentation to do so, provided the nurse has the documented education and competencies to do so and there is a facility policy that supports this practice</li> <li>➤ It is not within the RN scope of practice to remove nasal packings</li> <li>➤ It is within RN scope of practice to assess tympanic membranes, provided the nurse has the documented education and competencies to do so and there is a facility policy that supports this practice</li> <li>➤ It is not within the RN scope of practice to assess the patency of ventilation tubes in post myringotomy/tube insertion surgical patients</li> </ul>
December 16, 2010 Intrathecal chemotherapy	<p>Question: Is it within the scope of practice for chemotherapy certified RN's to administer intrathecal chemotherapy via an omaya reservoir or an LP needle?</p> <p>Answer: The board reaffirmed its decision of February 2009 with regard to the omaya reservoir, in which it opined it was within the certified chemotherapy RN scope of practice</p>

<p>December 16, 2010 Implantation of insertable cardiac monitors</p>	<p>to administer intrathecal chemotherapy via an omay pump provided it had been placed with fluoroscopy guidance and placement confirmed by the radiologist.</p> <p>The board opined that it is within the scope of a certified chemotherapy RN to administer chemo via an LP needle provided the needle has been placed with fluoroscopy guidance and placement confirmed by a radiologist.</p> <p>Question: Is it within the APRN scope of practice to implant insertable cardiac monitors, also called internal loop recorders?</p> <p>Answer: The board opined that this is not with the APRN scope if practice</p>
<p><b><u>February 17, 2011</u></b></p> <p>Reconsideration of the December 16, 2010 re: Implantation of insertable cardiac monitors</p>	<p>Question: Is it within the APRN scope of practice to implant insertable cardiac monitors, also called internal loop recorders?</p> <p>Answer: Board consensus that it is within the scope of APRN practice to implant insertable cardiac monitors, as long as the APRN has the documented education, skills and competencies to do so. Additionally there needs to be a facility policy that supports this practice.</p>
<p><b><u>March 17, 2011</u></b></p> <p>LNA infusion of tube feedings via a pump (update of board opinion dated Fall 2000)</p> <p>RN scope of practice regarding C-arm</p> <p>RN scope of practice regarding application of neuro-monitoring percutaneous needles and operating neuro-monitoring equipment</p>	<p>Question: Can an LNA administer tube feedings via pump?</p> <p>Answer: Board consensus that it is within the scope of practice of an LNA to administer tube feedings via pump, provided the LNA had the education, skills and documented competencies to do so. Additionally there needs to be a facility policy that supports this practice.</p> <p>Question: Is it within the scope of practice of an RN to compress pedal of C-arm under direct supervision of the provider.</p> <p>Answer: Board consensus that it is not within the scope of practice of an RN to compress the C-arm pedal.</p> <p>Question: Is it within the RN's scope of practice to apply neuro-monitoring percutaneous needles and/or to operate neuro-monitoring equipment during a procedure, in the operating room?</p> <p>Answer: Board consensus that it is not within RN scope of practice to apply neuro-monitoring percutaneous needles, to operate neuro-monitoring equipment, or to interpret signals. It is within the RN scope of practice to push the reset button under the direction of the surgeon.</p>
<p><b><u>April 21, 2011</u></b></p> <p>LNA scope of practice to deliver OTC medication in home setting</p> <p>RNFA scope of practice to insert secondary trocars</p>	<p>Question: Would the Board consider an exemption process that could be available unique circumstances in which a law is prohibiting safe delivery of an over-the-counter medication to a minor at home by an LNA?</p> <p>Answer: Board reaffirmed that medication administration is not within the scope of a Licensed Nursing Assistant pursuant to RSA 326-B:14</p> <p>Question: Is it within scope of practice of RNFA to insert secondary trocars under physician supervision during laparoscopic surgery?</p> <p>Answer: Board consensus that it is within the scope of practice for RNFA to insert</p>



	SECONDARY trocars under physician supervision during laparoscopic surgery provided competencies in Nur 404.12 are met and are within the policies and procedures of institution.
<b><u>May 19, 2011</u></b>	
RN scope of practice to set up patient's CPAP therapy	<p>Question: Can an RN with appropriate competencies provide education and set up a patient's CPAP therapy?</p> <p>Answer: Board consensus that this procedure is done by respiratory therapists and competent members of the public. The nursing license is not required to perform this function.</p>
LNA scope of practice to perform a urine dip	<p>Question: Is it within the scope of practice of the LNA to perform a urine dip with a Chem Strip and report the findings to a licensed nurse?</p> <p>Answer: Board consensus that the LNA can perform this procedure provided they have competencies and facility policies support the nursing assistant practice.</p>
RN scope of practice to perform a slit lamp exam	<p>Question: With demonstrated competence, is it within the scope of practice for an RN to perform a slit lamp exam including measuring intraocular pressure?</p> <p>Board consensus that it is not within RN scope of practice to perform this procedure. The Board further opines this is within the APRN scope of practice provided they have the competencies to perform the procedure.</p>
RN scope of practice to administer IV "push" bolus doses of NMB's	<p>Is it within the RN scope of practice to administer IV "push" bolus doses of Neuromuscular blockage agents or paralytics?</p> <p>Board consensus that this is not within the RN scope of practice and refers to the Anesthesia/analgesia administration Frequently Asked Questions located on the Board website at <a href="http://www.state.nh.us/nursing">www.state.nh.us/nursing</a> under the FAQ section (section: FAQ includes listings for many roles).</p>
LNA scope of practice to administer suppositories for bowel needs	<p>Question: Is it within LNA scope of practice to administer suppositories for bowel needs?</p> <p>Answer: Board consensus that it is within LNA scope of practice to administer only non-medicated suppositories provided they have the competencies to perform the procedure and facility policies support the nursing assistant practice.</p>
RN scope of practice to use magnetic card to deactivate ICD.	<p>Question: Is it within RN scope of practice to use magnetic card to deactivate implantable cardioverter-defibrillator?</p> <p>Answer: Board consensus that it is within RN scope of practice to use magnetic card to deactivate implantable cardioverter-defibrillator provided competencies and facility policies are met.</p>

**NH BOARD OF NURSING**  
**EDUCATION PROGRAMS: BOARD ACTIONS**

<i>Program</i>	<i>Program Coordinator/Chair</i>	<i>Board Action</i>	
<b><i>January 20th, 2011</i></b>			
Mountain View Nursing Home-LNA Program	Joyce Luongo	Continued Approval	
<b><i>February 17th, 2011</i></b>			
Med Pro Educational Services LLC-MNA Program	Pamela Heggelund	Continued Approval	
<b><i>March 17<sup>th</sup>, 2011</i></b>			
Omnicare Inc- MNA Program	Kathy Jordon	Continued Approval	
Dover High School-Regional Career Technical Center LNA Program	Margaret LaPointe	Initial Approval	
Seacoast School of Technology LNA Program	Linda Cutler	Continued Approval	
<b><i>April 21, 2011</i></b>			
Manchester School of Technology LNA Program	Linda Rea Camarota	Initial Approval	
<b><i>May 19, 2011</i></b>			
Nashua Community College RN Program	Jeanne Hayes	Continued Full Approval	
St. Anselm College RN Program	Sharon George	Continued Full Approval	
River Valley Community College RN Program	Vada Aucter	Continued Approval with monitoring of NCLEX results	

**DISCIPLINARY ACTIONS**

January 2011 through May 2011

At its November 15, 2007 meeting, Board members voted to publish names of individuals involved in disciplinary actions. At its March 20, 2003 meeting, Board members voted reprimands will no longer be posted in the Newsletter. Any questions please call Susan Goodness at the Board office, (603) 271-2323.

<b>DATE OF ACTION</b>	<b>LIC NUMBER</b>	<b>NAME</b>	<b>BOARD ACTION</b>	<b>ACTION CAUSING DISCIPLINE</b>
1/20/2011	013747-22	Perkins, Rachel	Denied reinstatement of licensure	
1/20/2011	033996-21	Sullivan, April	Denied reinstatement of licensure	
1/20/2011	041775-24	Amoche, Antony	Revoked w/\$1,000 civil penalty	For violating sections of the Nurse Practice Act including (1) taking cash from a client without his knowledge or authorization and/or, (2) taking a client's credit card without his knowledge or authorization and/or (3) using a client's credit card to make cash advances without his knowledge or authorization.

2/17/2011	017775-21	Ryan, Kathleen	Voluntary Surrender	
2/17/2011	020009-24	Hollingsworth, Linda	Voluntary Surrender	
2/21/2011	012811-22	Sullivan, Traci	Voluntary Surrender of License	
2/23/2011	029072-21	Wilkins-Knight, Brenda	Probation (2 yrs) w/750.00 civil penalty	For violating sections of the Nurse Practice Act including (1) forcefully administering medications to a resident and/or, (2) failing to properly document the time she administered medication to a resident and/or (3) exhibiting a pattern of behavior that is incompatible with the standards of practice.
2/23/2011	028134-24	Berg, Donna	Revocation w/\$1,000.00 civil penalty	For violating several sections of the Nurse Practice Act including (1) diversion of drugs or controlled substances, (2) misappropriation of a client's resources, (3) a pattern of behavior that is incompatible with the standard of practice for licensed nursing assistants, and/or, (4) failure to cooperate with a lawful investigation of the Board.
3/17/2011	045260-21	Lyman, Susan	Voluntary Surrender	
3/17/2011	050786-21	McGinley, Kristen	Voluntary Surrender	
3/17/2011	057050-21	Meehan, Kevin	Probation (2 yrs) w/restrictions & conditions	For violating the Nurse Practice Act by failing to comply with the terms of the Road to Recovery Program.
3/17/2011	042809-21	Watjen, Tammy	Reinstate after reentry - probation 2years w/stips	
3/17/2011	039079-24	Bailey, Katie	Voluntary Surrender	
3/17/2011	019700-24	Hurst (Clough), Stephanie	Voluntary Surrender	
3/17/2011	031530-24	Neault, Alesha	Voluntary Surrender	
3/17/2011	022196-24 (MNA)	O'Leary, Joanne	Voluntary Surrender	
4/21/2011	059031-21	DeCristoforo, Kim	Voluntary Surrender	
4/21/2011	044259-21	Heath, Kristin	Voluntary Surrender	

4/21/2011	026377-21	Lougee, Robert (Tom)	Probation (3 yrs) w/restrictions & conditions	For violating sections of the Nurse Practice Act including (1) a nursing practice that may have created unnecessary danger to a client's life, health or safety and/or, (2) failing to record or report in an accurate manner without omission, falsification or alteration and patient care data or health care records, and/or (3) a pattern of behavior consisting of more than one incident of professional misconduct that is incompatible with the standards of practice.
4/21/2011	013747-22	Perkins, Rachel	Reinstatement of licensure Probation (3 yrs) w/restrictions & conditions	
4/21/2011	010940-22	Shore, Charles Daryl	Voluntary Surrender	
4/21/2011	033864-21	Tustin, Gesina	Deny reinstatement of licensure	
4/21/2011	056710-21	Weaver, Christine	Probation (2 yrs) w/restrictions & conditions	
4/21/2011	032032-24	Deming, Jessica	Denied Reinstatement of licensure	
4/21/2011	039392-24	Foote, Deborah	Voluntary Surrender	
4/21/2011	036120-24	Greenwood, Christopher	Voluntary Surrender	
4/21/2011	023653-24	Grygiel, Jacqueline	Preliminary Agreement for Practice Restrictions	
5/6/2011	064255-21	Driscoll, Raymond	Probation (1 yr)	Reciprocal discipline with Massachusetts Board of Nursing.
5/17/2011	055687-21	Pitts, Whitney	Probation removed	
5/19/2011	014824-22	Dean, Melanie	Voluntary Surrender	
5/19/2011	041504-24	Foss, Ashlee	Preliminary Agreement for Practice Restrictions	
5/19/2011	039673-24	Brousseau, Jonna	Preliminary Agreement for Practice Restrictions	



### **Road to Recovery**

The New Hampshire Road to Recovery is designed to assist licensees who are experiencing challenges with drug/ alcohol impairment, physical disabilities, or mental disabilities who continue to safely practice. These individual licensees require monitoring and support for the issues they face. The board supports those individuals in recovery, who maintain a safe practice, provided they are able to successfully conform to the reporting requirements listed in their agreement with the board.

Candidates for the program provide written evidence of their appropriateness for admission to the program. Participant supporting documents are reviewed by the board confidentially. The board determines whether the licensee is a candidate for the Road to Recovery based on facts from the individual, health care provider, and employer. The candidate then agrees to conform to the board requirements.

The board website contains the specific forms participants must complete on a regular basis at [www.state.nh.us/nursing](http://www.state.nh.us/nursing) under the "Enforcement" as well as the "Forms, Applications, Publications" sections. These forms and guidelines allow the licensee to continue with employment while meeting the stipulations related to safe practice. Professional support groups are also available on the website under the "Quick Link" section of our home page.

Currently, the board has 14 participants who are gainfully employed and succeeding in their professional goals and behaviors. We encourage licensees who are experiencing difficulties related to drug/alcohol impairment or physical/mental disabilities to contact Margaret Walker, at the board, if they require the support to adhere to professional practice standards at 271-2323 or 271-6282.

### **On-Line Disclaimer**

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